

U.S. Department of Justice  
United States Marshals Service**PROCESS RECEIPT AND RETURN**See Instructions for "Service of Process by the U.S. Marshal"  
on the reverse of this form.

PLAINTIFF <u>Sandra J. White</u>		COURT CASE NUMBER <u>CA 06-008-KAJ</u>
DEFENDANT <u>Detective Marzec et. al.</u>		TYPE OF PROCESS <u>C/O</u>
<b>SERVE</b> ➡  <b>AT</b>	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN <u>Attorney General of the United States U.S. Dept. of Justice</u>	
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) <u>950 Pennsylvania Ave, NW Washington D.C. 20530-0001</u>	
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:		
<u>Sandra J. White</u>		Number of process to be served with this Form - 285 <u>1</u>
<u>9008 Greentop RD</u>		Number of parties to be served in this case <u>6</u>
<u>Lincoln DE, 19960</u>		Check for service on U.S.A. <u>X</u>

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):  
FoldPauper Case

Signature of Attorney or other Originator requesting service on behalf of:

☒ PLAINTIFF  
☐ DEFENDANT

TELEPHONE NUMBER

302-402-9337

DATE

3-6-06**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin	District to Serve	Signature of Authorized USMS Deputy or Clerk <u>DF</u>	Date <u>3-8-06</u>
	No. _____	No. _____	No. _____		

I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.

Address (complete only if different than shown above)

Date of Service <u>3/29/06</u>	Time am pm
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Signature of U.S. Marshal or Deputy  
STC

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund

REMARKS:

Served via cert mail



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## Track & Confirm

### Search Results

Label/Receipt Number: **7004 1160 0006 7939 8159**  
Status: **Delivered**

Your item was delivered at 4:47 am on March 29, 2006 in  
WASHINGTON, DC 20530.

### Track & Confirm

Enter Label/Receipt Number.

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